# **CHAPTER 4**

# LOAN OFFICER'S REPORT

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# INTRODUCTION

The loan officer's report should present all the information and facts necessary for SBA to make a credit decision on your request for guaranty. It should be very detailed and in-depth. If properly prepared, it will enable SBA to give a credit decision in a more responsive and timely manner. Instructions for completing the report begin on the following page. After the instructions you will find a copy of the Report in the form of an Excel spreadsheet. You may use your own format; however, you still must cover all the same information that is included in our report.

The Excel spreadsheet format is available from the North Florida District Office. To print the document, go to "tools" and then "print options" rather than the normal print procedures.

#### LOAN OFFICER REPORT INSTRUCTIONS

**NAME OF APPLICANT:** Describe who the borrower(s) will be. If sole proprietorship, provide the name of the individual followed by dba. If partnership, provide name of partners or partnership followed by dba (if applicable). If corporation, provide corporate name followed by dba (if applicable). If eligible passive company, provide names of operating entity and asset owner(s), as co-borrowers. If stock purchase, provide name of stock purchaser (whatever legal entity it is) and name of the corporation being acquired, followed by dba (if applicable), as joint borrowers.

**ADDRESS:** State the address where the business is located OR if it is relocating, the address of the new location.

**PHONE:** Phone number of the applicant business.

**LENDER:** Name of institution, name of loan officer, and phone number of loan officer.

**TYPE OF BUSINESS:** Describe applicant's primary industry.

**NAICS CODE:** State code as indicated for primary industry in the North American Industry Classification System manual (see Chapter 1 for discussion of NAICS codes).

**YEAR ESTABLISHED:** State year in which business was first established. If legal status has changed (i.e. sole proprietor to corporation), state date the business was originally established as a sole proprietor.

**EMPLOYER TAX ID NUMBER:** EIN assigned by the Internal Revenue Service.

**POLICY SIZE LIMIT:** Refer to the SBA's size standards at <a href="www.sba.gov/size">www.sba.gov/size</a> to determine the size standard for the applicant business.

**APPLICANT SIZE:** If size standard for applicant's business is by number of employees, provide average number of employees over the last calendar year OR if it is by \$, provide average of last 3 years sales.

<u>CREDIT ELSEWHERE CONSIDERED:</u> State "Memo in lender file" if you have considered credit elsewhere and have documented your file.

CHANGE OF OWNERSHIP: If purchasing an existing business OR if change of ownership is involved, <u>provide justification</u> for change and the sales price of the business. (Show calculations to justify sales price using one of the formulas for evaluation provided in Chapter 2). State if it is a stock purchase or asset purchase. If it is just an asset purchase, include information (i.e. book value, appraisal, et al) as to how the purchase price of the asset was determined. State the relationship between the buyer and seller. If close family members, refer to Chapter 1 for additional documentation required.

**AFFILIATES:** Discuss whether or not the business has any affiliates (Chapter 1 discussion on determining affiliations), who the affiliate(s) is/are, and describe relationship. Use "Affiliate Size Standard Calculations" form provided in the Loan Officer Report format to determine consolidated size standard.

**ELIGIBLE PASSIVE COMPANY:** Describe ownership of both the EPC (real estate/asset owner) and the operating entity (see Chapter 1 for a discussion of EPC).

**<u>DEBT REPAYMENT:</u>** If debt refinancing is involved, describe in detail. State how the refinancing will benefit the Borrower and how it meets SBA's 20% refinancing rule ((see Chapter 2).

**FRANCHISE:** State name of franchisor and whether FTC disclosure and franchise agreement have been submitted for SBA's review (see Chapter 1). Give general information about franchisor. Call at least two or three existing franchisees for their opinion/level of satisfaction with franchisor and provide documentation as to the details of those conversations.

(NOTE: The above also applies to licensing, distributorship, or membership agreements.)

**NEED/PURPOSE OF LOAN:** Detail how the loan proceeds are to be utilized. Be specific -- do not just lump everything into "working capital". Provide details as to how working capital will be used. (See Chapters 1 and 2 for ineligible and eligible uses of loan proceeds.)

**TERM:** See Chapter 2 for calculation of term and maximum maturities allowed.

**EQUITY INJECTION:** Itemize owner's injection and the source of the funds, particularly if the loan is for a start-up business or purchase of an existing business.

**CREDIT REPORTS:** Individual reports should be obtained for each proprietor, partner, 20% or more stockholder & guarantors.

<u>**D&B**</u> (or other similar business report) should be obtained for corporations and franchisors (if Lender has access to such reports). Any derogatory information must be explained and justified. (If bankruptcy or pending litigation, see Chapter 1).

The **BALANCE SHEET ANALYSIS AND COMMENTS** should be based on the **proforma** balance sheet (see examples of proformas in Chapter 2).

**PROFORMA:** If the interim column is used, the # days must be filled in or all ratios will be skewed. Total of debit column must equal total of credit column.

**BALANCE SHEET ADJUSTMENTS/COMMENTS:** Describe in detail the adjustments that were made on the proforma.

<u>CASH FLOW/DEBT COVERAGE:</u> Show calculations for historical and projected cash flow. (Make sure compensation of proprietor, partner, or officer has been considered.) Is it adequate to service ALL proforma debt?

**BREAKEVEN:** Calculate breakeven (Chapter 2 for formula). Are historical or projected sales sufficient?

**PROFORMA SCHEDULE OF FIXED OBLIGATIONS:** Proforma debts should include all debts reflected on the proforma balance sheet as well as any lease or other payments which are not reflected either in projected expenses or liability sections. Payments should include principal and interest.

**REPAYMENT ABILITY:** Check credit reports for any liabilities which may have been omitted from the business or individual's personal financial statements. When determining repayment ability, also consider the personal debt service of the proprietor, partner or corporate officer. Itemize their income and debt service requirement. Is proposed salary/withdrawal from business adequate to service personal debts? As a general rule, fixed debt payments (plus rent payment if no mortgage) should not exceed 40-45% of gross income.

**FRANCHISE (WAIVER OF ROYALTIES):** Is franchisor going to be willing to sign SBA's royalty waiver? If not, provide explanation/justification.

**RATIO ANALYSIS:** Compare ratios to RMA industry averages for same NAICS/SIC. Discuss whether in line with RMA and explain any sizeable differences.

**NET WORTH ANALYSIS:** Discuss reconciliation of net worth addressing the components of equity such as stock, paid-in capital, retained earnings, dividends paid and withdrawals. Year End net worth balance should be carried forward as the next period's beginning net worth. Explain any variances.

**WORKING CAPITAL ANALYSIS:** Show calculation based on working capital formula provided (see Chapter 2 for acceptable alternate methods). Discuss adequacy of the available working capital. If the formula does not "fit" the particular business you are evaluating, then provide justification as to how you made the determination that working capital is adequate.

**COLLATERAL:** Detail who owns the collateral being pledged, list the street address for any real estate, provide identification numbers for motor vehicles or other similar properties, and itemize prior liens (including name of creditor, original amount of debt, and current balance of debt).

<u>CALCULATE LIQUIDATION VALUE</u> based on % as stated on Loan Officer's Report format (% may be adjusted up or down on a case-by-case basis). Discuss adequacy of collateral. Explain the basis for your conclusions. (See Chapter 2 for comments on when personal collateral must be pledged.)

<u>APPRAISAL:</u> Detail date of appraisal and who performed it (qualifications of appraiser must be included in the appraisal). If it is more than one year old, an updated appraisal may be required. If the appraisal discloses that there is "excess" land, provide justification. If appraisal has not been included in the application package, state "required in authorization".

**ENVIRONMENTAL:** Detail date of environmental questionnaire/Phase I audit/Phase II audit, who performed it (qualifications of assessor must be included in the questionnaire and/or audit), and its findings or conclusion. (See Chapter 2 for more details on environmental requirements.)

**LEASED PROPERTY:** Detail street address(es) of ALL leased location(s). Discuss terms of lease(s) <u>and</u> renewal options available. State whether or not term(s), including options, will cover the proposed term of the loan. Term of lease(s) should be as long as the loan term. If it does not, explain and provide justification as to why this is acceptable. (Is location an important factor for this business?) State whether an assignment of lease will be required or whether a lessor's agreement only will be required. Please specify number of days to be required in lessor's agreement for notice of default (generally, 60 days will be input unless you specify a lesser number).

**DISABILITY INSURANCE:** Discuss the necessity for/lack of disability insurance.

<u>LIFE INSURANCE:</u> State names of those principals upon which life insurance will be required and the amount of insurance to be required on each. <u>If there is no insurance or insurance is less than the loan amount is being required, provide justification.</u>

**GUARANTORS:** List guarantors and specify whether secured/unsecured.

**PERSONAL RESOURCES:** Comment on liquid assets held by each proprietor, general partner, limited partner owning 20% or more of the business and each stockholder owning 20% or more. If applicant has unencumbered real estate that is not going to be injected or pledged, detailed justification <u>MUST</u> be provided as to why it should not be required. Make a statement that excess personal resources do not exceed allowable amounts (see Chapter 1).

If there are any **OTHER COMMENTS OR CONDITIONS** (such as the following), they may be discussed on an **ADDENDUM** to the Loan Officer's Report.

STANDBY AGREEMENTS:	State who the standby creditor is	s and the present balance
of the debt. Also, state standby	conditions (i.e. no interest or prin	ncipal payments allowed,
interest only @%	allowed, principal payments of \$	allowed but
no interest, principal and interest	st payments allowed so long as Sl	BA loan is not in default, et
al). Justify conditions.		

<u>FINANCIAL STATEMENTS:</u> State your requirement for frequency of receipt of financial statements, type statement to be required (i.e. in-house, CPA prepared/reviewed/audited, et al). Will annual tax returns be required and from whom?

<u>OCCUPANCY:</u> Discuss use of property to be purchased or constructed if subject business will not occupy 100% of the square footage. (See Chapter 1 for discussion on allowable leased space.)

**OTHER:** Make any additional comments that are necessary to clarify any issues related to the application package OR any additional conditions to be required in the Loan Authorization (i.e. salary limitations, any special construction loan requirements, change of residency requirement, et al).

## LOAN OFFICER'S REPORT

Loan Summary and Lender's Analysis

Name of Applica	ant:						
Address:		. (	Dity:	State:	Zip:		
Phone:		Lender					
Type of Busines	s:						
NAICS Code:		Year Established:	-	Employer Tax Id Number:			
Amount of Loan	Request:			% of SBA Guaranty:			
Guaranteed Am	ount	\$0					
Requested Loar	Term:	years		Variable Basis: Prime+	Initial Rate:		
Rate Adjustmen	t Period:			Monthly Loai	n Payment:		
Guarantee Fee:		\$0.00		Annual Debt	Service	\$0	
SBA Loan Class	3:		Internation	nal Trade Loan (IT)	YorN		
Eligibility:	Rural	Y or N	Involved in	n Exporting	YorN		
	Policy Size Limit:			Applicant Size:			
	Credit Elsewhere	Considered					
	Change of Owners	hip: (If yes, explain)					
	Affiliates:(If yes, na	mes)("Affiliate Size Standa	rd Calculations" fo	rm attached)			
	, , , , , , , , , , , , , , , , , , , ,	,,					
	Eligible Passive Co	ompany: (If yes, describe)					
	Eligible Fassive Ci	ompany. (ii yes, describe)	-				
	D-14 D	1	·>				
	Debt Repayment: (	If yes, amount and justifica	tion)				
Fuinting CDA D			Original Ares		Otation		
Existing SBA Ba	lance:		Original Amt:		Status:		
Lender:			City:	State:	Zip:		
SBA Servicing E	Experience w/ Bank:						
Business Back	ground and Nature	of Operations:					
Sale of Product	t or Service to Expo	rter					
Sale of Froduc	to dervice to expe						
Franchise:							

Managemer	t's Expe	erience and C	ualifications:						
						_			
						_			
						_			
Need (Purpo	se) for	Loan:							
	,								
					Walliam Co.				
	Term:		Use of Proc	eeds:			Loan:	Borrower:	Total Cost:
				Land and Building		\$			0
			Expansion of						0
			Leasehold In						0
				Machinery/Equipment					0
				Furniture/Fixtures					0
			Debt Refinar						0
				Accounts Payable					0
			Purchase of						0
			Cash - Work						0
			Other:	Closing Costs					0
Blended Ter	m:	#DIV/0!							
Diolidea 101		norrio.	TOTAL REC	UESTED LOAN AMOUNT:		\$	0	0	
Req. Maturity	r.		years	OLOTED EONIT AMOUNT		Ψ.		TOTAL COST: \$	0
SBA Guaran		ntage	,	(attach calculation)					
Source of Bo				(0.0001.0000000101.)					
000,000,00									
Credit Repo	rts:								
Personal:			Source:		Ratino	:		Student Loans	
Comments:			-						
Business:	Date:		Source:		Rating	:		Bankruptcy/Litigation	
Comments:								,	
Franchise:	Date:		Source:		Ratin	1:			

	-				_								_	
Enter Date/Type	_		_		_			Interim	_		_		_	
ASSETS	R		R		R		R		R	Debit	R	Credit	R	ProForm
Cash	-		-		_		-		-		-		_	0
Accounts Rec	-		-		_		-				-		_	. 0
Inventory	_		-		-		-		-		_		_	0
Cost in Excess			-		_		_							0
Other Current														0
Total Current		0	_	0	_	0		0		0		. 0		0
Fixed Assets			_		_								_	0
Other Assets														0
Prepaid Exp							3							0
TOTAL ASSETS		0		0		. 0		0		0		0		0
Enter#days		365		365		365								365
DEBT / WORTH									1					
Accts Payable														0
Curr. Mat. LTD														0
Other Debt														0
Taxes Payable												1 10 10 10 10 10 10 10 10 10 10 10 10 10		0
Current SBA														0
Other														0
Bill in Excess							_		_					0
Total Current		0		0		0	_	0	_	.0		0		0
Notes Payable									1					0
SBA														0
Due to Owners									$\vdash$					0
Other LTD	_		_				-							0
Total LTD	_	0		0		0		0		0	- //	0	_	0
TOTAL LIAB	_	0		0		0		0		0		0	_	0
C/P Stock / Treasury	_	-	-			·				-	-	0		0
Paid-In Cap									$\vdash$		_		-	0
Retained Earn														0
Total Worth		0	-			0		0	-	0	_	0	_	
DEBT & WORTH		0		0		0		0		0		0	_	0
Balance Sheet Adjustme	nte						_		_		-	0	_	
balance Sheet Adjustine	ints	Comments.							-		_			
					-								-	
					_		_							
					_									
			-											
					_									

Historical - Projected Earnings and	Cash Flow		(000)			
PROFIT AND LOSS	YearEnd	YearEnd	YearEnd	Interim	Proj.	Proj.
Enter Statement Dates						
Sales						
Cost of Goods Sold						
Gross Profit	0	0	0	0	0	0
Operating Expenses						
Officer Compensation						
Interest Expense						
NonOperating Inc(+) / Exp(-)						
Income Taxes						
NET PROFIT (1)	0	0	0	0	0	0
Depreciation (2)						
Interest (3)	0	0	0	0	0	0
Rent (4)						
Other (5)						
CASH FLOW (1-5)	0	0	0	0	0	0
DEBT COVERAGE	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
BREAKEVEN POINT	0	0	0	0	0	0
Proforma Schedule of Fixed Obligate	tions (including Inte	erest):	(000)			
		1st Year	2nd Year	3rd Year	4th Year	5th Year
SBA		0	0	0	0	0
4						
Total Annual Fixed Obligations		0	0	0	0	0
Repayment Ability:						
Franchise (waiver of royalties):						

RATIOS	YearEnd	YearEnd	YearEnd	Interim	ProForm	RMA
Current Ratio	0.00	0.00	0.00	0.00	0.00	
Quick Ratio	0.00	0.00	0.00	0.00	0.00	
Receivable T/O (days)	0.00	0.00	0.00	0.00	0.00	
Inventory T/O (days)	0.00	0.00	0.00	0.00	0.00	
Payable T/O (days)	0.00	0.00	0.00	0.00	0.00	
Fixed Assets / Worth	0.00	0.00	0.00	0.00	0.00	
Debt / Worth	0.00	0.00	0.00	0.00	0.00	
Sales/Working Capital	0.00	0.00	0.00	0.00	0.00	
Sales / Total Assets	0.00	0.00	0.00	0.00	0.00	
Gross Profit	0.00%	0.00%	0.00%	0.00%	0.00%	
Net Profit	0.00%	0.00%	0.00%	0.00%	0.00%	
	YearEnd	YearEnd	Interim			
WORTH RECONCILIATION Beginning Net Worth	0	0	0			
WORTH RECONCILIATION Beginning Net Worth C/P Stock Issues	0	0	0			
WORTH RECONCILIATION Beginning Net Worth C/P Stock Issues Add Paid-In Cap	0 0 0	0 0 0	0 0 0			
WORTH RECONCILIATION Beginning Net Worth C/P Stock Issues Add Paid-In Cap Net Income	0	0	0			
WORTH RECONCILIATION  Beginning Net Worth  C/P Stock Issues  Add Paid-In Cap  Net Income  C/P Cash Dividends(-)	0 0 0	0 0 0	0 0 0			
WORTH RECONCILIATION Beginning Net Worth C/P Stock Issues Add Paid-In Cap Net Income C/P Cash Dividends(-) Adjustments to RE (-)	0 0 0	0 0 0	0 0 0			
WORTH RECONCILIATION Beginning Net Worth C/P Stock Issues Add Paid-In Cap Net Income C/P Cash Dividends(-) Adjustments to RE (-) Accounting Change (-) NET WORTH BALANCE	0 0 0	0 0 0	0 0 0			

Working Capital Analysis: (show	calculation)							
STEP								
1	CGS% X ITO (II		1	X	0			0
2	#1 + ARTO(IN E		0	+	0			0
3	CGS% X APTO	(IN DAYS)	1	Х	0			0
4	#2-#3		0		0			0
3	SALES / 365		0	1	365			0
4	#5 X #4		0	X	0	=		0
	WORKING CAF	PITAL NEEDED	FOR PROFORM	1A			\$0	
	WORKING CAF	PITAL AVAILABL	E ON PROFOR	МА			\$0	
Collateral	Book	To Be	ProForma	Market	Prior	Est. Net	t	Liquid
(Enter value in only one column)	Value	Acquired	Value	Value	Liens	Liquid.		%
Land & Building							0	80.00%
Machinery/Equipment							0	25.00%
Furniture/Fixtures							0	25.00%
Inventory							0	10.00%
Accounts Receivable							0	10.00%
Personal Real Estate							0	80.00%
Other							0	
TOTALS	0	0	0	(	0 0		0	
Collateral Adequacy:								
Appraisal: Environmental Audit:								
Leased Property:								
Term of lease(years):		Options:						
Comments:								
Disability Insurance:								
Life Insurance:								
Name of Insured:				Amount of As				
Name of Insured:				Amount of As	signment			
Comments:								

Guarantors and/or Owners:				
Name:	Relationship:	SS#:	Phone:	
Address:	City:	St:	Zip:	
Outside Net Worth	Annual Income:	Debt:	D/I:	#DIV/0!
		Annual Debt Payments		
Name:	Relationship:	SS#:	Phone:	
Address:	City:	St:	Zip:	
Outside Net Worth	Annual Income:	Debt	D/I:	#DIV/0!
		Annual Debt Payments		
Availability of Funds from Personal Resources:				
Utilization of Personal Resources: Lig	uid assets of \$ .0	OM do not exceed the greater of \$100.0M or 2	2 times the loan	
amount (\$0M) if loan amount is \$250.0M or less;				
and \$500.0M; \$750.0M or one times the loan amount				"A".
Paragraph 4(a), have been met.			70, 00 10, 000,	
Cagapir (a), note bearing.				
Credit Weaknesses:				
Credit Strengths:				
Loan Officer's Recommendation:				
In addition, I believe the applicant to be of good ch	naracter.			
Loan Officer's Signature:		Title:	Date:	
				The state of the s
FOR SBA ONLY				
The above report has been reviewed by a SBA Loan	Officer with the follo	owing recommendations:		
Approved	Declined	Additional Commer	nts	
Loan Officer's Signature:		Title:	Date:	

## AFFILIATE SIZE STANDARD CALCULATIONS

COMPANY	YEAR	SALES	EMPLOYEES	SIC CODE
BORROWER	AVERAGE		\$0	0
	AVERAGE		\$0	0
	AVERAGE		\$0	0
	AVERAGE		\$0	0
*	AVERAGE		SO	0
	AVERAGE		\$0	0
	AVERAGE		\$0	0

## CALCULATIONS OF EXCESS PERSONAL RESOURCES

) PRINCIPAL NAME		LOAN AMOUNT
LIQUID ASSETS:	(EXEMPTIONS - CLOSELY HELD NON-MARKE	ETABLE STOCKS, INDIVIDUAL
	RETIREMENT ACCOUNTS AND SIMILAR ASS	ETS)
CASH		\$
CD'S		\$
SAVINGS		\$
MARKETA	BLE SECURITIES	\$
CASH SUR	RENDER VALUE OF LIFE INSURANCE	s
TOTAL LIG	QUID ASSETS	\$0.00
	50,000 OR LESS: \$100,000 OR 2.0 TIMES THE DUNT, WHICHEVER IS GREATER	\$100,000.00
	50,000 AND <\$500,000: \$500,000 OR 1.50 TIMES AMOUNT, WHICHEVER IS GREATER.	\$500,000.00
	500,000: \$750,000 OR 1.0 TIMES THE DUNT, WHICHEVER IS GREATER	\$
EXCESS L	IQUID RESOURCES	0.00